

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	70205	4-27-99
O.I.P.E. CLASSIFIER		5	4-30-99
FORMALITY REVIEW	<i>[Signature]</i>	71555	5-12-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	03/11/99
2	✓	✓	04/25/99
3	✓	✓	04/25/99
4	✓	✓	04/25/99
5	✓	✓	04/25/99
6	✓	✓	04/25/99
7	✓	✓	04/25/99
8	✓	✓	04/25/99
9	✓	✓	04/25/99
10	✓	✓	04/25/99
11	✓	✓	04/25/99
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If more than 150 claims or 10 actions  
staple additional sheet here

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